**Registration Deadline: Sept. 7** 



No on-site registration

Coastal Running League &

# HARPSWELL HARRIERS

## Fall 2010 Registration Form

Cross-country running is an exciting sport

With lifelong fun and fitness benefits. This program offers training and conditioning for participants. Runners compete as a team but have a sense of individual performance and accomplishment.

### **Weekly Competitions**

Wednesdays, with similar groups from area communities. Ages: 7 & under - 1/2 mile; 8 & 9 - 3/4 mile; 10, 11 & 12 - 1 mile. Some bus transportation will be provided. **First meet is Wed., Sept. 22 at Yarmouth.** Full schedule will be handed out at first practice.

#### **Practices**

Mondays: 3:45 - 4:30 p.m. at Harpswell Islands School.

**First meeting and practice: Wednesday, Sept. 8 at 3:45 P.M.** Parents are encouraged to walk or run, and to help with the practices.

#### Coaches

Chris Kinkade, Sport Coord./Coach 319-7280 or ChrisKinkade@yahoo.com Ass't. Coaches, TBA

Gina Perow, ToH Rec. Dir. 833-5771 or harpswellrec2@suscom-maine.net

# **Parent Participation**

**Parent participation is needed and appreciated.** If interested, please contact Chris.

## Registration

Fee is \$10.00 per runner (one form for each runner). Late fee/non-resident fee: additional \$5.00. **No on-site registration.** 

#### Mail to:

Town of Harpswell, Recreation Dept., P.O. Box 39, Harpswell, ME 04079

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Distribution Dates: August 9

**Release from Liability:** In consideration of the permission granted to myself/my child by the Harpswell Harriers to participate in the practices, competitions and other activities during Fall 2010, I hereby release and discharge the Harpswell Harriers, Coastal Running League, its agents and officers, MSAD 75 and Town of Harpswell from all actions, causes of actions, damages, claims or demands which I, my heirs, executors and administrators and assigns may have against the aforementioned parties for all personal injuries, known or unknown, which my child has or may incur by participation in the above mentioned or inferred activities. I realize that I must provide my own health/accident insurance for injuries that I or my child may sustain while participating in the above mentioned activities. I know that running a road or cross country race is a potentially hazardous activity and that I assume all risks for myself and/or my child including but not limited to falls, contact with other participants or vehicles, the effects of weather including high heat and/or humidity or cold, and the conditions of the road or course. I give the supervisor permission (in my absence) to obtain whatever medical treatment may appear or be necessary in the event of illness or injury.

Date: Signature: Parent / Gu
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<sup>\*</sup>E-mail is important to communicate necessary information

<sup>\*</sup> Photos & videos taken may be used for publicity. \*